



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re U.S. Patent Application of** )  
**NAKAMURA et al.** )  
**Application Number: 10/090,767** ) **Art Unit 2157**  
**Filed: March 6, 2002** ) **Examiner Emmanuel Coffy**  
**For: CLUSTERING DISK CONTROLLER, ITS DISK** )  
**CONTROL UNIT AND LOAD BALANCING** )  
**METHOD OF THE UNIT** )  
**Attorney Docket No. HITA. 0181** )

**Honorable Assistant Commissioner  
for Patents  
Washington, D.C. 20231**

**COVER LETTER**

Sir:

The fee for submission of claims is calculated as shown below:

| FOR   | TOTAL WITH<br>NEW CLAIMS<br>ADDED | TOTAL<br>CURRENTLY ON<br>FILE | CLAIMS<br>ALREADY<br>PAID | RATE    | CALCULATION |
|---|-----------------------------------|-------------------------------|---------------------------|---------|-------------|
| Total Claims  | 11                                | 11                            | -XX<br>(Over 20)          | x \$50  | 0           |
| Independent<br>Claims   | 3                                 | 3                             | -XX<br>(Over 3)           | x \$200 | 0           |
| MULTIPLE<br>DEPENDENT<br>CLAIM(S)   |                                   |                               |                           | + \$360 | 0           |
| REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). |                                   |                               |                           | x ½     |             |
|   |                                   |                               |                           | TOTAL   | 0.00        |

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

Response to Office Action  
(with Claim Amendments)  
 Substitute Specification  
 Preliminary Amendment  
 Information Disclosure Statement

Petition for Extension of Time (1 month)  
 Terminal Disclaimer  
 Letter to Draftsperson  
 Assignment  
 Other \_\_\_\_\_

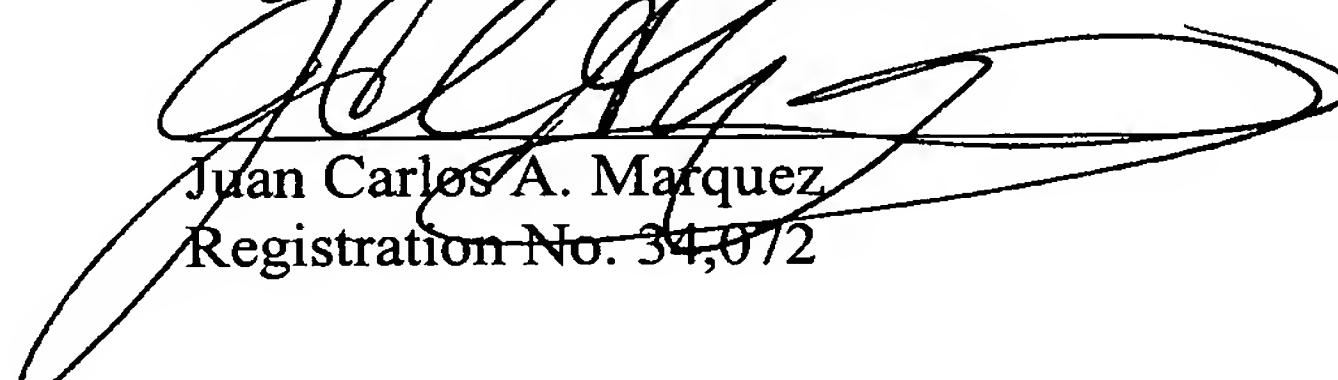
Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for  
\_\_\_\_\_. A duplicate copy of this paper is enclosed.

A check in the amount of **\$120.00** to cover the three-month extension fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees associated with this  
communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit  
Account Number 08-1480**.

Respectfully submitted,

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